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CONFIRMATION NO. 1455

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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 08/972,464 11/14/1997 PAT 6,618,174
which claims benefit of 60/030,962 11/15/1996

O.K. LB

** FOREIGN APPLICATIONS *****

now LB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VT	SHEETS DRAWING 10	TOTAL CLAIMS 2221	INDEPENDENT CLAIMS 81
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature LB	Initials LB		
Verified and Acknowledged				

ADDRESS

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TITLE

In-line holographic mask for micromachining

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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